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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/623,677	07/21/2003	Curtis A. Spilburg	P05794US01	5078
	7590	EXAMINER		
801 GRAND AVENUE			WEIER, ANTHONY J	
SUITE 3200 DES MOINES, IA 50309-2721			ART UNIT	PAPER NUMBER
			1794	
			MAIL DATE	DELIVERY MODE
			05/29/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonvious Summans	10/623,677 SPILBURG, CURTIS A.		RTIS A.
Interview Summary	Examiner	Art Unit	
	Anthony Weier	1794	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Anthony Weier</u> .	(3)		
(2) Office of Mr. Edmund Sease.	(4)		
Date of Interview: <u>21 May 2008</u> .			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	²)∏ applicant's representative)]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached. g)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Examiner confirmed with to go abandoned</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OF THE SUBSTANCE OF THE INTERVIEW OF THE INTERVIEW OF THE SUBSTANCE OF T	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APPI DAYS FROM T WHICHEVER IS	LICANT IS 'HIS LATER, TO
Francisco Nata - Variante de disconsidera de la Companya de la Com	English and the control of	d	
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	rea	

Application No.

Applicant(s)